Statewide Healthcare Coalition Steering Committee Meeting – 7/22/13

Topic	Discussion	Outcome/Action Items
Welcome and Introductions	The members of the group introduced themselves and were welcomed to the meeting.	Sign in sheet is attached
Review Goal, Purpose & Charge of Regional Coalitions	Emily Nickel, KDHE, provided an overview of what the regional coalitions are charged with. This presentation was a recap from October 2012, with some additional new information on state work plan objectives that incorporate healthcare coalitions.	Outcomes – Suggested changes: PowerPoint is attached Action items: 1. None
Purpose of Statewide Coalition Steering Committee	Discussion was led by Charlie Keeton with input from committee members: This steering committee is not a coalition. It's about information exchange between all seven regions to discuss statewide gaps and best practices. It's a clearinghouse. This committee is to find solutions through each of the disciplines and bridging gaps to help bring new ideas which can be used at the county level, regional HCC levels and statewide. Communication is key.	Outcomes - An updated contact list is attached with phone numbers and emails for each steering committee member. Action items: None
Challenges of Regional Coalitions	The following are challenges and goals each coalition has identified: Northeast Coalition members provided input to Julie Schmidt - Meeting just to meet. Members would like to see an agenda that every agency sees as a value. There are no clear objectives. Members are still getting to know each other. Objectives: Finalizing charter and membership listing. List of assets.	Outcomes – None Action Items: None

Getting committees generated or given tasks.

Southwest

Challenges are out there, such as finding the meaning in the meeting. Charter approved. New members being brought in, such as a funeral director. Pretty cohesive. Head of the curve on coalition building.

Northwest

Challenges are distance, travel to meetings, though a benefit as it can isolate incidents in a region. Personality issues and fact that one individual may wear many hats and have limited number of personnel to perform tasks. Lack of understanding what the coalition is to accomplish. Lack of practice in working together in large incident. Need a clearing house for resources. Many volunteers, but hard to get them trained. Regional response group, who would handle liability issues, pay, training. Need a team of people to respond. Example, decon.

Regional needs assessment. Regional meetings need to have a purpose. Want speakers to come to the meetings. Educational pieces. Coalition should build communication partnerships. Need to be able to share.

Strategic plan at next meeting.

South Central

A challenge was expressed by long-term care - What is the purpose? What is the meaning of the meeting? Long-term care facility felt isolated. Didn't see how they fit in. Not seeing their role. Time and money was also an issue.

What are our capabilities? What hazards are we facing?

North Central

Going to be discussing future meetings and when they will be held. HCC has approved the charter. Starting to invite people who were nominated for steering committee to have them at the regional HCC. Members are still asking, "what is it? What is it supposed to do?" Sue indicated she wants people to see value in this. Talked about problems within region. Communication is an issue within group. Less than ideal for collaboration and participation.

Asset is we have a good group. Been together for some time. People are not afraid to bring up issues. Goals, going to address in September meeting. Need to identify a chair.

Kansas City, Kansas

Quarterly meetings. MARC meetings (bi-state) every month, which is like a coalition.

Challenge, nine county metro area. MARC draws in MO side. Long-term care issues and primary care want to understand why they need to be involved.

Liz – too many meetings, same stuff...which meeting do you go to?

Good things: Active participation from members. A lot of resources to draw from. Establish chairs.

Southeast

Challenges: get charter approved. Identify committees and define purpose. Keep members involved. Then how to sustain it.

Good things: Group of people with interest. Subject matter experts. Much participation from all the way around.

Behavioral health - Are behavioral/mental health experts attending the meetings?

SW, yes we have a member. Chaplain ICS/IMT team out of St. Catherine's. Very active.

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NW, has invited a person from hays medical. NE, two different agencies have been invited to attend. KCK, WY center was invited.

EMS – Terry David can talk with some of his colleagues on giving presentations on what is happening out there in the EMS arena. In the South Central region videos were created to explain each discipline. Push out to each discipline with the region. These videos can be shared. Can be found at www.ksef8.org

Emergency Management – Can see the regional coalitions as a way to foster relationships. Happy to share ideas. Always looking to learn new ideas.

KHERF/KDHE/KALHD— A challenge that is observed is the idea of the value in the meeting. Funding in the future is a challenge.

Challenge Overview:

Time

Purpose

Value for all

Conflicting goals

Duplicating goals

Sustainability

Lack of knowledge about capabilities

Continuity of Information

Where do we want to be at the end of this (5-years). What is it for BP5? Appendix 7 of HPP Performance Measure.

Goals of Statewide Coalition Steering Committee & Prioritization of Goals	Create consistent messages to promote the understanding of roles of the healthcare coalitions in Kansas for health and community preparedness. Create general guidance to help coalitions in defining the purpose. Make Appendix 7 understandable and make it part of the overall goal.	Outcomes — Working Group Common Message for HCC: David Dodge Ed Garner Sue Cooper Tami Wood Anne Gray
		Action items – Emily Nickel will set up a meeting wizard request to newly formed work group to gauge a best date/time to meet face-to-face in September to work on the two tasks.
Wrap Up & Next Meeting	It was suggested to have a SharePoint or some type of website to be able to share documents between steering committee members. A primary care clinic has been identified to receive grant funds from KDHE-BCHS from each region. Emily will send each clinic point of contact a nomination form to be an At-Large member on the steering committee. She will collect the forms and send out to all Steering Committee members to select the primary care clinic to serve on the committee. The goal is to send this out by September for votes. Ideally, the new at-large member would join the October meeting. Upcoming conferences: August 12: AWR 232 Mass Fatalities Planning and Response for Rural Communities. At Lyon County Sheriff's Office, 425 Mechanic Street, Emporia, KS 66801. Must register by July 29, 9 pm. To register go to https://www.ruraltraining.org/training/schedule/2013-08-12-awr232-emporia-ks-001/	Action items – 1. Emily Nickel will explore the option of having a web page dedicated to Healthcare Coalition Activities/Resources on the KDHE Preparedness Website. 2. Emily will send a nomination form to each primary care clinic. a. Forms will be collected and disseminated out to committee members. b. Committee members will select their first choice by mid-September. c. An invitation will be sent to the selected primary care clinic

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August 29-30: Regional Health and Medical Preparedness Conference. At the Kauffman Foundation Center, 4801 Rockhill Road, Kansas City, MO 64110. To register go to http://region7preparednessconference.eventbrite.com December 11-13: 2013 National Healthcare Coalition Preparedness Conference in New Orleans. To register go to http://healthcarecoalitions.org/nhcrc-conference/registration . Next Steering Committee meeting will be October 21 at Rolling Hills Conference Center at 10 am – 2 pm.	representative.